

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Our Principles PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00603621       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>DDC Advocacy</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 24 / 2016</div> </div>		
Mailing Address 805 15th Street, N.W. Suite 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5152.20</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : SE.5460</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>		
Purpose of Expenditure Voter contact-telephone calls		Category/ Type	<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>		
Name of Federal Candidate Donald J. Trump			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House    District: _____  <input checked="" type="checkbox"/> President    <input type="checkbox"/> Senate    State: <u>MD</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>DDC Advocacy</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 24 / 2016</div> </div>		
Mailing Address 805 15th Street, N.W. Suite 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12821.00</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : SE.5462</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>		
Purpose of Expenditure Advertising		Category/ Type	<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>		
Name of Federal Candidate Donald J. Trump			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House    District: _____  <input checked="" type="checkbox"/> President    <input type="checkbox"/> Senate    State: <u>MD</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">17973.20</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">17973.20</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Jamie Jodoin*
*[Electronically Filed]*

Date

MM / DD / YYYY  
04 / 25 / 2016

Signature